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March 3, 2005  
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**TO:** Examiner Firmin Backer  
Art Unit: 3621  
**COMPANY:** USPTO

**FAX NO.:** 703-746-5521**PHONE NO.:** 703-305-0624

**FROM:** Marc A. Sockol  
**E-MAIL:** MSockol@ssd.com

**DIRECT DIAL NO.:** +1.650.843.3392

**RE:** Application No: 09/731,572  
Inventor(s): Daniel Schreiber *et al.*  
Filed: December 5, 2000  
Entitled: "COPYRIGHT PROTECTION OF DIGITAL IMAGES  
TRANSMITTED OVER NETWORKS"  
Docket No.: 43426.00049

**Message:**

Dear Examiner Backer:

Per your request, enclosed please find the Preliminary Amendment with RCE as filed on September 22, 2004.

If you have any questions, please do not hesitate to contact me directly at (650) 843-3392.

Sincerely,



Marc A. Sockol

PaloAlto/79794.1

**FAKED**

MAR 8 PM 12:22

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43426.00049

Cathi Thoorsell / Palo Alto, CA

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Date Mailed: September 22, 2004 | By: MAS/emj | PTO DATE STAMP:  
Application No.: 08/731,572 | Docket No.: 43426.00049  
Applicant: Daniel Schreiber, et al.  
Title: COPYRIGHT PROTECTION OF DIGITAL IMAGES TRANSMITTED OVER NETWORKS

The following has been received in the U.S. Patent Office on the date stamped hereon:

- |   |   |
|---|---|
| <input type="checkbox"/> Patent Application ___ Pages ___ Claims                            | <input checked="" type="checkbox"/> Preliminary Amendment with RCE (17 pages)                     |
| <input type="checkbox"/> Drawings Informal ___ Sheets                                       | <input type="checkbox"/> Petition for Extension of Time   |
| <input type="checkbox"/> General Authorization / Request to Petition for Extensions of Time |   |
| <input type="checkbox"/> Oath/Declaration   | <input checked="" type="checkbox"/> Transmittal Form  |
| <input type="checkbox"/> Assignment & Recordation Cover Sheet                               | <input type="checkbox"/> Notice of Appeal   |
| <input type="checkbox"/> Verified Statement Claiming Small Entity Status                    | <input checked="" type="checkbox"/> Fee Transmittal (in duplicate)                                |
| <input type="checkbox"/> Continued Prosecution Application (§1.53(d))                       | <input type="checkbox"/> Issue Fee Transmittal with PTO-85b                                       |
| <input type="checkbox"/> Provisional Application ___ Pages                                  | <input type="checkbox"/> Copy of PTO-1533, Notice to File Missing Parts                           |
| <input type="checkbox"/> Design Application ___ Pages ___ Drawings                          | <input type="checkbox"/> Info. Disclosure Statement & PTO-1449/Refs ___                           |
| <input type="checkbox"/> Status Letter  | <input type="checkbox"/> Request to Correct Filing Receipt  |
| <input type="checkbox"/> Check No. _____ for \$ _____                                       | <input type="checkbox"/> Check No. _____ for \$ _____   |
| <input type="checkbox"/> Power of Attorney  | <input checked="" type="checkbox"/> Other: Request for Continued Examination (RCE) (in duplicate) |
| <input checked="" type="checkbox"/> Certificate(s) of First Class Mailing                   |   |

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WASHINGTON, D.C. 20231

Squire, Sanders & Dempsey L.L.P.  
600 Hansen Way, Suite 100  
Palo Alto, CA 94304-1043



PTO/SA/21 (04-04)


Approved for use through 07/31/2006. OMB 0651-0031

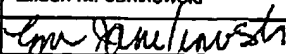
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|   |                      |                        |             |
|---|----------------------|------------------------|-------------|
| <b>TRANSMITTAL FORM</b><br>(to be used for all correspondence after initial filing) | Application Number   | 09/731,572             |             |
|   | Filing Date          | December 5, 2000       |             |
|   | First Named Inventor | Daniel Schreiber       |             |
|   | Art Unit             | 3621                   |             |
|   | Examiner Name        | Firmin Backer          |             |
| Total Number of Pages in This Submission  | 22                   | Attorney Docket Number | 43426.00049 |

| ENCLOSURES (check all that apply)  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Preliminary Amendment with RCE<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) ____ | <input type="checkbox"/> After Allowance Communication to Technology Center (TC)<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input checked="" type="checkbox"/> Return Postcard<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Request for Continued Examination (RCE) |
| Remarks  |   |   |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |  |
|--|--|
| Firm or individual name                    | Marc A. Sockol, Reg. No. 40,823<br>Squire, Sanders & Dempsey, LLP.<br>600 Hansen Way<br>Palo Alto, CA 94304-1043 |
| Signature                                  |                               |
| Date                                       | September 22, 2004   |

| CERTIFICATE OF TRANSMISSION/MAILING   |   |      |                    |
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| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. |   |      |                    |
| Typed or printed name   | Eileen M. Janikowski  |      |                    |
| Signature   |  | Date | September 22, 2004 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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for FY 2004**

Effective 10/01/2003, Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 770

## Complete if Known

|                      |                  |
|----------------------|------------------|
| Application Number   | 09/731,572       |
| Filing Date          | December 5, 2000 |
| First Named Inventor | Daniel Schreiber |
| Examiner Name        | Firmin Backer    |
| Art Unit             | 3621             |
| Attorney Docket No.  | 43428,00049      |

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None
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Account  
Number

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Name

Squire, Sanders &amp; Dempsey LLP.

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments  
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## FEE CALCULATION

## 1. BASIC FILING FEE

| Large Entity |          | Small Entity |          | Fee Description        | Fee Paid |
|--------------|----------|--------------|----------|------------------------|----------|
| Fee Code     | Fee (\$) | Fee Code     | Fee (\$) |                        |          |
| 1001         | 770      | 2001         | 385      | Utility filing fee     |          |
| 1002         | 340      | 2002         | 170      | Design filing fee      |          |
| 1003         | 530      | 2003         | 265      | Plant filing fee       |          |
| 1004         | 770      | 2004         | 385      | Reissue filing fee     |          |
| 1005         | 160      | 2005         | 80       | Provisional filing fee |          |
| SUBTOTAL (1) |          |              |          |                        | (3) 0    |

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

|                    |    |     |   |   |   |                |   |   |
|--------------------|----|-----|---|---|---|----------------|---|---|
| Total Claims       | 85 | -85 | = | 0 | X | Fee from below | = | 0 |
| Independent Claims | 4  | -4  | = | 0 | X | Fee from below | = | 0 |
| Multiple Dependent |    |     |   |   | X | Fee from below | = | 0 |

| Large Entity |          | Small Entity |          | Fee Description  | Fee Paid |
|--------------|----------|--------------|----------|--|----------|
| Fee Code     | Fee (\$) | Fee Code     | Fee (\$) |  |          |
| 1202         | 18       | 2202         | 9        | Claims in excess of 20                                     |          |
| 1201         | 88       | 2201         | 43       | Independent claims in excess of 3                          |          |
| 1203         | 290      | 2203         | 145      | Multiple dependent claim, if not paid                      |          |
| 1204         | 88       | 2204         | 43       | ** Reissue independent claims over original patent         |          |
| 1205         | 18       | 2205         | 9        | ** Reissue claims in excess of 20 and over original patent |          |
| SUBTOTAL (2) |          |              |          |  | (3) 0    |

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

| Large Entity |          | Small Entity |          | Fee Description  | Fee Paid |
|--------------|----------|--------------|----------|--|----------|
| Fee Code     | Fee (\$) | Fee Code     | Fee (\$) |  |          |
| 1051         | 130      | 2051         | 65       | Surcharge - late filing fee or oath  |          |
| 1052         | 50       | 2052         | 25       | Surcharge - late provisional filing fee or cover sheet                     |          |
| 1053         | 130      | 1053         | 130      | Non-English specification  |          |
| 1812         | 2,520    | 1812         | 2,520    | For filing a request for reexamination                                     |          |
| 1804         | 920*     | 1804         | 920*     | Requesting publication of SIR prior to Examiner action                     |          |
| 1805         | 1,840*   | 1805         | 1,840*   | Requesting publication of SIR after Examiner action                        |          |
| 1251         | 110      | 2251         | 55       | Extension for reply within first month                                     |          |
| 1252         | 420      | 2252         | 210      | Extension for reply within second month                                    |          |
| 1253         | 950      | 2253         | 475      | Extension for reply within third month                                     |          |
| 1254         | 1,460    | 2254         | 740      | Extension for reply within fourth month                                    |          |
| 1255         | 2,010    | 2255         | 1,005    | Extension for reply within fifth month                                     |          |
| 1401         | 350      | 2401         | 165      | Notice of Appeal   |          |
| 1402         | 330      | 2402         | 165      | Filing a brief in support of an appeal                                     |          |
| 1403         | 290      | 2403         | 145      | Request for oral hearing   |          |
| 1451         | 1,510    | 1451         | 1,510    | Petition to institute a public use proceeding                              |          |
| 1452         | 110      | 2452         | 55       | Petition to revive - unavoidable   |          |
| 1453         | 1,330    | 2453         | 665      | Petition to revive - unintentional   |          |
| 1501         | 1,330    | 2501         | 665      | Utility issue fee (or reissue)   |          |
| 1502         | 480      | 2502         | 240      | Design issue fee   |          |
| 1503         | 640      | 2503         | 320      | Plant issue fee  |          |
| 1480         | 130      | 1480         | 130      | Petitions to the Commissioner  |          |
| 1807         | 50       | 1807         | 50       | Processing fee under 37 CFR 1.17 (q)                                       |          |
| 1806         | 180      | 1806         | 180      | Submission of Information Disclosure Stmt                                  |          |
| 8021         | 40       | 8021         | 40       | Recording each patent assignment per property (times number of properties) |          |
| 1809         | 770      | 2809         | 385      | Filing a submission after final rejection (37 CFR § 1.129(a))              |          |
| 1810         | 770      | 2810         | 385      | For each additional invention to be examined (37 CFR § 1.129(b))           |          |
| 1801         | 770      | 2801         | 385      | Request for Continued Examination (RCE)                                    | 770      |
| 1802         | 900      | 1802         | 900      | Request for expedited examination of a design application                  |          |

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (\$) (3) 770

## SUBMITTED BY

|                   |                |                                   |        |           |                    |
|-------------------|----------------|-----------------------------------|--------|-----------|--------------------|
| Name (Print/Type) | Marc A. Sockol | Registration No. (Attorney/Agent) | 40,822 | Telephone | (65) 656-6500      |
| Signature         |                |                                   |        | Date      | September 22, 2004 |

Complete if applicable

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PTO/SB/17 (10-03)

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Effective 10/01/2003, Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 770

## Complete if Known

Application Number 09/731,572

Filing Date December 5, 2000

First Named Inventor Daniel Schreiber

Examiner Name Firmin Backer

Art Unit 3621

Attorney Docket No. 43426.00049

COPY

| METHOD OF PAYMENT (check all that apply)   |              | FEE CALCULATION (continued)  |              |                 |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|--|--------------|--|--------------|-----------------|--------------|-----------------|----------|-----------------|----------|------|-----|----------|-----|---------|--|------|-----|----------|----|---------|--|------|-----|----------|-----|----------|--|------|-----|----------|-------|------------|--|------|-----|---------|------|--|--|--------------|--------------|----------|----------|-----------------|----------|--|--|------|-----|---------|--|--|--|------|-----|----------|--|--|--|------|-----|----------|--|--|--|------|-------|----------|--|--|--|------|-------|------------|--|--|--|------|-----|----------|--|--|--|------|-----|----------|--|--|--|------|-----|----------|--|--|--|------|-------|------------|--|--|--|------|-----|---------|--|--|--|------|-------|----------|--|--|--|------|-------|----------|--|--|--|------|-----|----------|--|--|--|------|-----|----------|--|--|--|------|-----|----------|--|--|--|------|----|---------|--|--|--|------|-----|----------|--|--|--|------|----|---------|--|--|--|------|-----|----------|--|--|--|------|-----|----------|--|--|--|------|-----|----------|-----|--|--|------|-----|----------|--|
| <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money <input type="checkbox"/> Other <input type="checkbox"/> None<br><input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number: 05-0150<br>Deposit Account Name: Squire, Sanders & Dempsey L.L.P.<br>The Director is authorized to: (check all that apply)<br><input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. |              | <b>3. ADDITIONAL FEES</b><br><table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td></td><td></td><td>1051</td><td>130</td><td>2051 65</td><td></td></tr> <tr><td></td><td></td><td>1052</td><td>50</td><td>2052 25</td><td></td></tr> <tr><td></td><td></td><td>1053</td><td>130</td><td>1053 130</td><td></td></tr> <tr><td></td><td></td><td>1812</td><td>2,520</td><td>1812 2,520</td><td></td></tr> <tr><td></td><td></td><td>1804</td><td>520*</td><td>1804 520*</td><td></td></tr> <tr><td></td><td></td><td>1805</td><td>1,840*</td><td>1805 1,840*</td><td></td></tr> <tr><td></td><td></td><td>1251</td><td>110</td><td>2251 55</td><td></td></tr> <tr><td></td><td></td><td>1252</td><td>420</td><td>2252 210</td><td></td></tr> <tr><td></td><td></td><td>1253</td><td>950</td><td>2253 475</td><td></td></tr> <tr><td></td><td></td><td>1254</td><td>1,480</td><td>2254 740</td><td></td></tr> <tr><td></td><td></td><td>1255</td><td>2,010</td><td>2255 1,005</td><td></td></tr> <tr><td></td><td></td><td>1401</td><td>330</td><td>2401 165</td><td></td></tr> <tr><td></td><td></td><td>1402</td><td>330</td><td>2402 165</td><td></td></tr> <tr><td></td><td></td><td>1403</td><td>290</td><td>2403 145</td><td></td></tr> <tr><td></td><td></td><td>1451</td><td>1,510</td><td>1451 1,510</td><td></td></tr> <tr><td></td><td></td><td>1452</td><td>110</td><td>2452 55</td><td></td></tr> <tr><td></td><td></td><td>1453</td><td>1,330</td><td>2453 665</td><td></td></tr> <tr><td></td><td></td><td>1501</td><td>1,330</td><td>2501 665</td><td></td></tr> <tr><td></td><td></td><td>1502</td><td>480</td><td>2502 240</td><td></td></tr> <tr><td></td><td></td><td>1503</td><td>640</td><td>2503 320</td><td></td></tr> <tr><td></td><td></td><td>1460</td><td>130</td><td>1460 130</td><td></td></tr> <tr><td></td><td></td><td>1807</td><td>50</td><td>1807 50</td><td></td></tr> <tr><td></td><td></td><td>1806</td><td>180</td><td>1806 180</td><td></td></tr> <tr><td></td><td></td><td>8021</td><td>40</td><td>8021 40</td><td></td></tr> <tr><td></td><td></td><td>1809</td><td>770</td><td>2809 385</td><td></td></tr> <tr><td></td><td></td><td>1810</td><td>770</td><td>2810 385</td><td></td></tr> <tr><td></td><td></td><td>1801</td><td>770</td><td>2801 385</td><td>770</td></tr> <tr><td></td><td></td><td>1802</td><td>900</td><td>1802 900</td><td></td></tr> </tbody> </table> |              | Large Entity    | Small Entity | Fee Code        | Fee (\$) | Fee Description | Fee Paid |      |     | 1051     | 130 | 2051 65 |  |      |     | 1052     | 50 | 2052 25 |  |      |     | 1053     | 130 | 1053 130 |  |      |     | 1812     | 2,520 | 1812 2,520 |  |      |     | 1804    | 520* | 1804 520*  |  |              |              | 1805     | 1,840*   | 1805 1,840*     |          |  |  | 1251 | 110 | 2251 55 |  |  |  | 1252 | 420 | 2252 210 |  |  |  | 1253 | 950 | 2253 475 |  |  |  | 1254 | 1,480 | 2254 740 |  |  |  | 1255 | 2,010 | 2255 1,005 |  |  |  | 1401 | 330 | 2401 165 |  |  |  | 1402 | 330 | 2402 165 |  |  |  | 1403 | 290 | 2403 145 |  |  |  | 1451 | 1,510 | 1451 1,510 |  |  |  | 1452 | 110 | 2452 55 |  |  |  | 1453 | 1,330 | 2453 665 |  |  |  | 1501 | 1,330 | 2501 665 |  |  |  | 1502 | 480 | 2502 240 |  |  |  | 1503 | 640 | 2503 320 |  |  |  | 1460 | 130 | 1460 130 |  |  |  | 1807 | 50 | 1807 50 |  |  |  | 1806 | 180 | 1806 180 |  |  |  | 8021 | 40 | 8021 40 |  |  |  | 1809 | 770 | 2809 385 |  |  |  | 1810 | 770 | 2810 385 |  |  |  | 1801 | 770 | 2801 385 | 770 |  |  | 1802 | 900 | 1802 900 |  |
| Large Entity   | Small Entity | Fee Code   | Fee (\$)     | Fee Description | Fee Paid     |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1051   | 130          | 2051 65         |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1052   | 50           | 2052 25         |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1053   | 130          | 1053 130        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1812   | 2,520        | 1812 2,520      |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1804   | 520*         | 1804 520*       |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1805   | 1,840*       | 1805 1,840*     |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1251   | 110          | 2251 55         |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1252   | 420          | 2252 210        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1253   | 950          | 2253 475        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1254   | 1,480        | 2254 740        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1255   | 2,010        | 2255 1,005      |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1401   | 330          | 2401 165        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1402   | 330          | 2402 165        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1403   | 290          | 2403 145        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1451   | 1,510        | 1451 1,510      |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1452   | 110          | 2452 55         |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1453   | 1,330        | 2453 665        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1501   | 1,330        | 2501 665        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1502   | 480          | 2502 240        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1503   | 640          | 2503 320        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1460   | 130          | 1460 130        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1807   | 50           | 1807 50         |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1806   | 180          | 1806 180        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 8021   | 40           | 8021 40         |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1809   | 770          | 2809 385        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1810   | 770          | 2810 385        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1801   | 770          | 2801 385        | 770          |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1802   | 900          | 1802 900        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
| <b>1. BASIC FILING FEE</b><br><table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td></td><td></td><td>1001</td><td>770</td><td>2001 385</td><td></td></tr> <tr><td></td><td></td><td>1002</td><td>340</td><td>2002 170</td><td></td></tr> <tr><td></td><td></td><td>1003</td><td>530</td><td>2003 265</td><td></td></tr> <tr><td></td><td></td><td>1004</td><td>770</td><td>2004 385</td><td></td></tr> <tr><td></td><td></td><td>1005</td><td>160</td><td>2005 80</td><td></td></tr> </tbody> </table>  |              | Large Entity   | Small Entity | Fee Code        | Fee (\$)     | Fee Description | Fee Paid |                 |          | 1001 | 770 | 2001 385 |     |         |  | 1002 | 340 | 2002 170 |    |         |  | 1003 | 530 | 2003 265 |     |          |  | 1004 | 770 | 2004 385 |       |            |  | 1005 | 160 | 2005 80 |      | <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td></td><td></td><td>1202</td><td>18</td><td>2202 9</td><td></td></tr> <tr><td></td><td></td><td>1201</td><td>86</td><td>2201 43</td><td></td></tr> <tr><td></td><td></td><td>1203</td><td>290</td><td>2203 145</td><td></td></tr> <tr><td></td><td></td><td>1204</td><td>86</td><td>2204 43</td><td></td></tr> <tr><td></td><td></td><td>1205</td><td>18</td><td>2205 9</td><td></td></tr> </tbody> </table> |  | Large Entity | Small Entity | Fee Code | Fee (\$) | Fee Description | Fee Paid |  |  | 1202 | 18  | 2202 9  |  |  |  | 1201 | 86  | 2201 43  |  |  |  | 1203 | 290 | 2203 145 |  |  |  | 1204 | 86    | 2204 43  |  |  |  | 1205 | 18    | 2205 9     |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
| Large Entity   | Small Entity | Fee Code   | Fee (\$)     | Fee Description | Fee Paid     |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1001   | 770          | 2001 385        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1002   | 340          | 2002 170        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1003   | 530          | 2003 265        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1004   | 770          | 2004 385        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1005   | 160          | 2005 80         |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
| Large Entity   | Small Entity | Fee Code   | Fee (\$)     | Fee Description | Fee Paid     |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1202   | 18           | 2202 9          |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1201   | 86           | 2201 43         |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1203   | 290          | 2203 145        |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1204   | 86           | 2204 43         |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
|  |              | 1205   | 18           | 2205 9          |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
| SUBTOTAL (1) (\$ 0)  |              | SUBTOTAL (2) (\$ 0)  |              |                 |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |
| SUBTOTAL (3) (\$ 770)  |              | SUBTOTAL (3) (\$ 770)  |              |                 |              |                 |          |                 |          |      |     |          |     |         |  |      |     |          |    |         |  |      |     |          |     |          |  |      |     |          |       |            |  |      |     |         |      |  |  |              |              |          |          |                 |          |  |  |      |     |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |          |  |  |  |      |       |            |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |       |            |  |  |  |      |     |         |  |  |  |      |       |          |  |  |  |      |       |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |    |         |  |  |  |      |     |          |  |  |  |      |     |          |  |  |  |      |     |          |     |  |  |      |     |          |  |

| SUBMITTED BY      |               | Complete if applicable            |                    |
|-------------------|---------------|-----------------------------------|--------------------|
| Name (Print/Type) | Marc A. Sokol | Registration No. (Attorney/Agent) | 40,823             |
| Signature         |               | Telephone                         | (65) 855-6500      |
|                   |               | Date                              | September 22, 2004 |

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PTO/SB/30 (09-03)

Approved through 07/31/2006, OMB 0851-0031

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# Request For Continued Examination (RCE) Transmittal

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|                        |                  |
|------------------------|------------------|
| Application Number     | 09/731,527       |
| Filing Date            | December 5, 2000 |
| First Named Inventor   | Daniel Schreiber |
| Art Unit               | 3621             |
| Examiner Name          | Firmin Backer    |
| Attorney Docket Number | 43426.00049      |

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 C.F.R. 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).

- a. ☐ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.
- i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
- ii. ☐ Other \_\_\_\_\_
- b. ☒ Enclosed
- i. ☒ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☐ Other \_\_\_\_\_

## 2. Miscellaneous

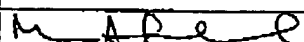
- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. 1.17(i) required)
- b. ☐ Other \_\_\_\_\_

3. **Fees** The RCE fee under 37 C.F.R. 1.17(e) is required by 37 C.F.R. 1.114 when the RCE is filed.

- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 05-0150
- i. ☒ RCE fee required under 37 C.F.R. 1.17(e)
- ii. ☐ Extension of time fee (37 C.F.R. 1.136 and 1.17)
- iii. ☐ Other \_\_\_\_\_
- b. ☐ Check in the amount of \$ \_\_\_\_\_ enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

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|                   |   |                                   |                    |
|-------------------|---|-----------------------------------|--------------------|
| Name (Print/Type) | Marc A. Sockol  | Registration No. (Attorney/Agent) | 40,823             |
| Signature         |  | Date                              | September 22, 2004 |

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| Name (Print/Type) | Eileen M. Janikowski  |
| Signature         |  |
| Date              | September 22, 2004  |

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PTO/SB/30 (09-03)

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|------------------------|------------------|
| Application Number     | 09/731,527       |
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| First Named Inventor   | Daniel Schreiber |
| Art Unit               | 3621             |
| Examiner Name          | Firmin Backer    |
| Attorney Docket Number | 43426.00049      |

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- a. ☐ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.

- i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_  
ii. ☐ Other \_\_\_\_\_

- b. ☒ Enclosed

- i. ☒ Amendment/Reply  
ii. ☐ Affidavit(s)/Declaration(s)  
iii. ☐ Information Disclosure Statement (IDS)  
iv. ☐ Other \_\_\_\_\_

2. ☐ Miscellaneous

- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. 1.17(f) required)  
b. ☐ Other \_\_\_\_\_

3. ☐ Fees The RCE fee under 37 C.F.R. 1.17(e) is required by 37 C.F.R. 1.114 when the RCE is filed.

- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 05-0150

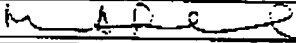
- i. ☒ RCE fee required under 37 C.F.R. 1.17(e)  
ii. ☐ Extension of time fee (37 C.F.R. 1.136 and 1.17)  
iii. ☐ Other \_\_\_\_\_

- b. ☐ Check in the amount of \$ \_\_\_\_\_ enclosed

- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

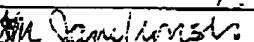
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| Name (Print/Type) | Marc A. Sockol  | Registration No. (Attorney/Agent) | 40,823             |
| Signature         |  | Date                              | September 22, 2004 |

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|                   |   |
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| Date              | September 22, 2004  |

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